

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09-720431

FILED DATE

19 MAR 2001

APPLICANT(S)

Corbberhaar

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
2		1		1		
3		1		1		
4		3		1		
5		3		1		
6		1		1		
7		1		1		
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TOTAL IND.	1		1			
TOTAL DEP.	14		10			
TOTAL CLAIMS	15		11			

	IND.		DEP.		IND.		DEP.		IND.		DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
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